

CM-2012/2013 Workplan

Your workplan is required before your 2012/2013 contract/amendment can be prepared. This survey is very similar to the prior year's survey, except for some additional options on dropdown menus. You may enter up to eight planned activities in this survey. If you need more than eight, please contact Jordan Deja. Please complete this survey (your workplan) no later than June 29, 2012. Don't forget to click "Done" when you are finished. Thank you.

NOTE: You are required to have at least one community organizing planned activity for your CM Policy Board activities. You may, of course, set up as many community organizing planned activities as you need.

1. Please select your County or County Consortium.

2. Please tell us your name.

Activity Description (1)

3. Enter your planned activity number. You select your own activity number. Please remember to keep the same number throughout the reporting process. Do not assign the same number to more than one planned activity.

4. Enter your activity title.

5. Enter site(s) where the activity will take place.

6. Describe your activity including whether it is an evidence-based program, a replication or a local innovation.

7. Select the primary risk or protective factor your activity addresses.

Other (please specify)

8. Select the category type for your activity.

9. Select the strategy that best describes your activity.

- ☐ Universal
- ☐ Selective
- ☐ Indicated

10. Select the population(s) to receive services.

- | | |
|--|--|
| <input type="checkbox"/> Pre-K (Ages 0-4) | <input type="checkbox"/> Grade 9 (Ages 14-15) |
| <input type="checkbox"/> Kindergarten (Ages 5-6) | <input type="checkbox"/> Grade 10 (Ages 15-16) |
| <input type="checkbox"/> Grade 1 (Ages 6-7) | <input type="checkbox"/> Grade 11 (Ages 16-17) |
| <input type="checkbox"/> Grade 2 (Ages 7-8) | <input type="checkbox"/> Grade 12 (Ages 17-18) |
| <input type="checkbox"/> Grade 3 (Ages 8-9) | <input type="checkbox"/> Young Adult (Ages 18-24) |
| <input type="checkbox"/> Grade 4 (Ages 9-10) | <input type="checkbox"/> Adult (Ages 25-64) |
| <input type="checkbox"/> Grade 5 (Ages 10-11) | <input type="checkbox"/> Senior (Ages 65+) |
| <input type="checkbox"/> Grade 6 (Ages 11-12) | <input type="checkbox"/> Parents (All Ages) |
| <input type="checkbox"/> Grade 7 (Ages 12-13) | <input type="checkbox"/> Grandparents (All Ages) |
| <input type="checkbox"/> Grade 8 (Ages 13-14) | <input type="checkbox"/> Foster Parents (All Ages) |

11. Activity Start/End Dates

	MM	DD	YYYY
Proposed Start Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Month	Day	Year
Proposed End Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Month	Day	Year

12. Estimated Funding Sources, Amounts and Partners.

Century 21	<input type="text"/>
CM	<input type="text"/>
Community Network	<input type="text"/>
School District	<input type="text"/>
Educational Service District (ESD)	<input type="text"/>
Readiness to Learn	<input type="text"/>
City/County	<input type="text"/>
DOH	<input type="text"/>
DBHR	<input type="text"/>
Law Enforcement/Juvenile Justice	<input type="text"/>
Service/Civic Organization	<input type="text"/>
Local Business	<input type="text"/>
Faith Based Organization	<input type="text"/>
Tribe/Tribal Organization	<input type="text"/>
Drug Free Communities	<input type="text"/>
Community Members/Volunteers	<input type="text"/>
Other	<input type="text"/>

13. The evaluation of this activity will meet the core measurement requirement using one of the following tools (see evaluation protocols for core measurement definition).

14. Based on your response to question 12, this is a substantially funded activity and the following tool will be used to evaluate (see evaluation protocols for substantially funded activity definition).

Other (please specify)

15. If this activity does not require either a core-measurement or substantially funded evaluation check the box below and skip to question 17.

☐ Skip to question 17.

16. Approximate Evaluation Dates. You are required to fill in either your pre/post dates or other evaluation date. Date for submission to Commerce is also a required field.

	MM	DD	YYYY
Pre-Test	<input type="text"/>	/ <input type="text"/>	/ <input type="text"/>
	Month	Day	Year
Post-Test OR	<input type="text"/>	/ <input type="text"/>	/ <input type="text"/>
	Month	Day	Year
Other evaluation type AND	<input type="text"/>	/ <input type="text"/>	/ <input type="text"/>
	Month	Day	Year
Domain survey or report submission to Commerce (no later than June 15)	<input type="text"/>	/ <input type="text"/>	/ <input type="text"/>
	Month	Day	Year

17. Additional Comments/Information about this planned activity.

IMPORTANT! PRINT OR COPY AND PASTE REPORT INTO A WORD DOCUMENT BEFORE CLOSING.

18. Do you have another activity? If so, please click yes to proceed to the next page. If not, click no to be directed to page 10.

- ☐ Yes, I have another activity.
- ☐ No, I am finished entering my activities.

Don't forget to click "NEXT" now and "DONE" when you are finished.